CONNECTICUT EMS MEDICAL ADVISORY COMMITTEE (CEMSMAC) Connecticut Hospital Association October 9, 2014

Minutes

Member Attendees: William Begg, M.D., David Cone, M.D., Richard Kamin, M.D., Kyle McClaine, M.D.

OEMS Staff: David Bailey, Kevin Brown

Guests: Barry Barkinsky, Lisa Bemben, James Brubaker, Nancy Brunet, Kevin Burns, Ralf Coler, Sean Fitch, Douglas Gallo,

Robert Grant, Phil Heavin, Joe Larcheveque, Shawn McKay, Patricia Paloia, Paul Rabeuf, John Quinlavin, Jim

Santacroce, Jay Stutz, Steven Wolf, M.D., Michael Zacchera

Chaired By: Richard Kamin, Kyle McClaine

TOPIC	DISCUSSION	ACTION
Meeting called to order at 10:05 am.	The minutes of September 11, 2014 CEMSMAC meeting were reviewed.	Minutes approved as written.
DPH/OEMS Report	No formal report. Ralf Coler expressed concern regarding the awareness of the two positions recently created at OEMS given the tenuous status of the Regional EMS Coordinators. Concern specifically that the Regional Coordinators are essential and that any additional hiring should not take the place of permanently funding the Regional Coordinators' positions.	Ms. Coler's concerns to be relayed to Mr. Barishansky

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Mission Lifeline STEMI Statewide By Lisa Bemben	Lisa Bemben provided a presentation about the potential to expand Mission Lifeline STEMI process statewide in relation to success of Hartford Area process. Brief discussion held.	Dr. Cone and Mr. Gallo expressed interest and plan to bring back to their respective regions/institutions for consideration. The Power Point presented will be distributed to group. Request to add this to the EMS Advisory Board agenda.
Statewide Guidelines By Dr. Kamin	Continued plan targeting draft in November for group to bring back to the regions.	
Review of Equipment List	 Current list attached. Concern regarding the requirement for potable water - Bailey explained that sterile water was removed but if still being carried that sterile water is potable. Concern regarding potable water what the speaker considered to be a standard that patients should never have anything by mouth. Clarification that no such blanket standard exists and that there are circumstances when patients may receive fluids/medicines by mouth Deadline for feedback on the list set for November with vote in December OEMS (Bailey) requested specific 	Group asked to submit feedback for the equipment list for November with plan for vote in December OEMS (Bailey) requested specific consideration with advice and recommendation regarding requirements for pediatric vehicle restraint devices for basic ambulances and SMART triage tags for first responder vehicles

	consideration with advice and recommendation regarding requirements for pediatric vehicle restraint devices for basic ambulances and SMART triage tags for first responder vehicles.	
CMED	This was brought up at the last meeting. Concerns regarding the CMED system Discussion regarding import of CEMSMAC having continued involvement/awareness of CMED status Universal interest in potential to investigate non voice-based methods of tracking inbound ambulance traffic. Greenwich and Stamford currently both employing a web-based, real-time status board for inbound ambulance traffic New Haven had similar "dashboard" access until local CMED funding was eliminated	This will remain on the agenda until further clarification.
Ebola/Enterovirus Preparation/Education By Dr. McClaine	Open forum to discuss concerns. Discussion regarding previous OEMS distribution of CDC guidance and how this has been incorporated in sponsor hospital practice Discussion regarding DPH direct communication (letter) to individual nursing providers. Question why EMS providers did not receive a similar communication? Equipment list requirement of coveralls discussed – current need for PPE to protect against Ebola may further validate this	This concern to be communicated to the OEMS Director

	requirement.
Regional MAC Reports	Region 1 – No report. Region 2 – No report.
	Region 3 – Meeting was held with discussion on: Clinical issues – focus on appropriate starting of IVs and administration of IVF Sepsis Guide is being drafted. Norwalk has an Alert. Discussion regarding inconsistent application of Naloxone among regional sponsor hospitals. Upgrades to Paramedic Level – town wants to re-evaluate and upgrade to paramedic level. This was discussed at the MAC and Regional level.
	Region 4 - Met recently. BLS Guidelines continue to be developed. Adoption of SMR, CCR, Naloxone by IN or IM use, Fire rehab without any medical monitoring, Training and implementation to begin shortly. Full intention to develop uniform ALS guidelines and Region 4 does plan to implement the statewide ALS guidelines once completed.
	Region 5 – Meeting held o Fire rehab process in development and will

	be shared with CEMSMAC BLS 12 Lead continues Protocol for use of tetracaine written. Decision to not allow RAD 57 use at BLS level Narcan	
Other Business/Ongoing Initiatives	Spinal Motion Restriction O Reformatted to mirror planned statewide guidelines. Coordination with educational program ongoing. Expect release shortly Naloxone	
	 Some will roll out this month. The education component is on the Education website. 	
	BLS EKG Acquisition The EMS Advisory Board voted yes on this. Their recommendation to expand the program is with the Commissioner.	
	Mobile Integrated Healthcare O Potential need for legislation for alternative billing for services provided by EMS when no transport O Discussion at EMSAB regarding establishment of Ad Hoc Committee to look at development on MIH in CT O Expectation that the CEMSMAC will have representation if opportunity exists	
Adjourned	Meeting adjourned at 12:04 pm. The next CEMSMAC meeting is scheduled for November 13 th	Agenda to follow

at AHA.	

Respectfully submitted by, Yolanda Williams